

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**New York Life Insurance Company Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Ms. Mary L. Stockton**

Mailing Address 3545 32nd Street

City

San Diego

State

CA

Zip Code

92104-4304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

04 / 30 / 2013

**Transaction ID : PR614498429**

Amount of Each Receipt this Period

83.34

P/R Deduction (\$83.34 Monthly)

Full Name (Last, First, Middle Initial)

**B. Mr. Thomas J. Kanaley Jr.**

Mailing Address 150 Lenox Way

City

San Francisco

State

CA

Zip Code

94127-1113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2013

**Transaction ID : PR614528429**

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

Full Name (Last, First, Middle Initial)

**C. Mr. Robert J. Poindexter**

Mailing Address 351 Janie Lane

City

Shreveport

State

LA

Zip Code

71106-6028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

New York Life Insurance Company

Occupation

Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

04 / 30 / 2013

**Transaction ID : PR614698429**

Amount of Each Receipt this Period

250.00

P/R Deduction (\$250.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

583.34